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DEPARTMENT OF NURSING EDUCATION

IN CHARGE OF
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THE NEED OF CO-OPERATION BETWEEN THE HEAD NURSE AND THE INSTRUCTOR¹

BY PERMELIA MURNAN DOTY

In looking over recent articles on the head nurse, one is impressed by the fact that all the emphasis is put upon the head nurse as an executive and very little is said about her function as a teacher. We are told that the head nurse of to-day doesn't have time to teach, that she isn't greatly interested in teaching anyway and prefers not to do it.

It is true that we live in a changing world, but some of us who were brought up by the old-fashioned teaching head nurse and who have very grateful memories of her splendid work as a teacher, are inclined to believe that it will be a serious loss to our nursing schools if the teaching head nurse is pushed too far to one side to make way for a successor whose chief interest centers in the management of her ward and who feels that the instructor is the person responsible for the teaching and cheerfully relegates this work to the class room.

Not so many years ago practically all teaching concerned with nursing methods and practical procedures was done on the wards by the head nurse. Students were admitted in groups of two or three to take the place of the same number of outgoing nurses. It would have been difficult to arrange adequate class work under such a system and besides, it was felt that the probationers were needed on the wards from the day of their arrival. The head nurses had full responsibility for teaching and training these new students and accepted this part of their work as a matter of course.

A little later, we find the students admitted in larger groups and regular class room instruction given in nursing methods, but we still find the probationer going "on duty" in the wards as soon as she arrived at the hospital and so large a part of the routine work was assigned to her that she could not be spared for class work for more than an hour or two a day. Obviously the head nurses still functioned very largely as teachers and they took great pride and interest in this phase of their work. I remember in my own school we frequently heard ourselves referred to as Miss S's or Miss B's probationers. Certain head nurses had considerable local fame as

¹ Read at the convention of the National League of Nursing Education, Chicago, June, 1919.

teachers and the new probationers who had training under them were considered very fortunate. I think the head nurses who were not good teachers in those days were decidedly in the minority. They were doubtless chosen for the position because of ability in this line, and it is the tendency for people to do well, work which they consider important and interesting, provided they have some capacity for it.

Changing conditions added to the demands made upon the head nurse as an administrator of her miniature hospital and her executive duties became very much more complex. At the same time came the realization that if we were to justify our right to be called schools and if we were to attempt to prepare students in anything like an adequate way to meet the demands made upon the profession, we must have more systematic class room instruction in every branch of nursing work.

The first big stride forward was made by the adoption of a preliminary period, practically given up to theoretical work. The second step was the advent of the trained teacher in our schools of nursing. To-day no one questions the necessity or importance of these two reforms but, as in all reform, there is a tendency for the pendulum to swing too far in the extreme direction and it is a question whether we are not in danger of divorcing our theoretical and practical training to too great an extent. The instructors themselves are recognizing this tendency and have been among the first to hoist a danger signal.

Other educators envy us our ward laboratory ideally equipped with clinical material for teaching. Are we utilizing this to the fullest extent in our schools? It is a trite saying that theory and practice must go hand in hand, but we need to bear constantly in mind that we are not going to get the best results in our schools, no matter how excellent the class room teaching, without constant correlation of the theory and practice.

The busy instructor cannot be expected to carry this work alone, and must depend very largely on the coöperation of supervisor and head nurse. With the right kind of team work between head nurses and instructors we could work out an ideal teaching system. The head nurse must be made to see how important her work as a teacher is. Certainly she has an excellent opportunity because of her close and constant contact with students to become familiar with their capacities and needs and to give help where it is most needed. She alone can help them to acquire the skill and finished technique which is the result of frequently repeated supervised practice.

She should be constantly in touch with the instructor in order that they may have the same methods of work. How often have we

heard pupils say, "Oh, that isn't the way Miss A. taught us!" Is it not true that we are in danger of developing a class room procedure and a ward procedure? We know what demoralization this means.

Closer coöperation between the head nurse and instructor would do much to standardize nursing methods. No new procedure should be introduced in the class room which has not first been presented to the head nurse. Head nurse and instructor working together can perfect old methods and decide on the adoption of new procedures. If the head nurse thinks the technique is becoming too complicated for practical use, she can suggest modifications, and the head nurse who is really familiar with the class room methods can make a worth while effort in seeing that the nurses actually use the methods taught in the class room.

On the other hand, the instructor should consider it her duty to keep in touch with what is going on in the ward so that her teaching may be adjusted to the needs that arise out of ward work.

The problem of coöperation seems to be in devising some way to utilize to the fullest possible extent the material at their disposal and to make the dividing line between theory and practice, class room and ward, less sharp. They must recognize their common aim,—to develop a perfectly functioning nurse, and work together to that end.

We do not believe that the majority of student nurses can be left to make the application of class room theory to the work on the ward. No matter how careful the instructor is to tie up her work with the students' ward experience, there is a great deal of valuable teaching material which will be overlooked unless the head nurse is constantly on the alert to point out the connection.

She has a splendid opportunity to teach bacteriology, materia medica, therapeutics, anatomy, symptomatology and allied subjects in a way which is particularly valuable because it provides associations for the student which tend to fix the new knowledge in her mind in a way that will prevent its being easily forgotten. We all know from experience that we remember best the things which are associated with actual cases under our care. The head nurse who is doing this teaching will have an additional incentive to keep in touch with the progress in nursing and medicine and to continue her reading and study.

It is pretty generally felt among the students to-day that the head nurses think merely of getting the work of the ward done in the most efficient manner and take little, if any, interest in the education of the nurse. This is the most serious criticism made by the college women who have recently entered nursing schools. When we have

head nurses in the wards who can teach and who are interested in doing so, we shall undoubtedly find much less dissatisfaction among our student body, many of whom are inclined to feel to-day that they are not getting altogether a "square deal."

The success and standing of the hospital depends very largely on having a capable executive in charge of each department whose business it is to see that the machinery runs smoothly, but the head nurse owes a duty to the pupils as well as to the hospital authorities. Students have a right to expect supervision in their work from a person with training and experience, and supervision of the right type implies teaching, since merely to condemn without teaching right methods of work is utter waste of time and energy for both supervisor and supervised.

Florence Nightingale says, "If you cannot get the habit of observation in one way or another, you had better give up being a nurse, for it is not your calling, however kind and anxious you may be." Here, again, the importance of the head nurse as a teacher is emphasized. Observation cannot be taught in the class room; it must be developed in connection with the daily work on the ward. A question here and there, a word about symptoms as they develop, and results will follow. Bedside charts and records and the right type of night report can be well used in this connection as well as the verbal reports concerning new patients or changes in condition.

In any field where so much routine is necessary there is always a danger of mechanical work. This is especially noticeable during the third year of the student nurses' training, and an alert head nurse, interested in teaching, can give new inspiration and show the student new fields to conquer every day. The head nurse who is a teacher does not forget that it is instinctive for everyone to be creative and she loses no opportunity to encourage initiative in her student nurses. Even though the pupil nurse cannot be given full responsibility for the conduct of the ward, could she not be given more scope for individual work?

While we may not all agree about the value of a formal class in Ethics in the training school, we are realizing more and more, as we admit younger students to our schools, the need of ethical training for the young girl making adjustments to entirely new conditions. As our old text books used to say, the head nurse teaches by "precept and example" and she has unlimited opportunities to teach those things which will lead to the development of character and will send out, as members of the profession, women with high standards of honor and of individual and social responsibility. Is the head nurse conscious of how great an influence her teaching in this direction

may have? Standards of conduct and work which are instilled in their students by the right type of head nurse are not temporary, but are carried down through the years.

The interest of the head nurse who seems to have teaching ability might be stimulated by giving her definite class room teaching to do. Emphasize her position as a member of the faculty of the school as well as a member of the staff of the hospital. It adds dignity to the position. Possibly a small additional salary might be given for the class room work. Ought not the head nurse on the children's ward be the best possible person to teach the care of children, and the operating room head nurse to teach surgical technique? In some schools the head nurses give in the class room the demonstrations which particularly relate to their work. For example, the head nurse on the orthopedic ward gives the lessons on the Bradford frame and extension.

It has been demonstrated in business and industry that no one department can be efficiently run except as a part of the whole. This is equally true of a hospital and much of the friction between heads of departments, which is so disastrous to good work, is the result of lack of understanding and appreciation of the work of others.

We need more communion among the faculty of our training schools. A share in the interests of other departments will create larger interests and do away with much petty fault finding and friction. Appreciation of the aims of the other members of the staff, a realization of the common end for which all are striving will do much to bring about a coöperation without which it is impossible to get desired results.

Probably one of the best methods of getting this coöperation between members of the staff is by means of faculty conferences. The success of these conferences will at first be largely a question of leadership, but as interest grows there will undoubtedly be more active participation by every member. Every effort should be made to avoid any likeness to a class and too much must not be expected from the first meetings, but it is the logical step in the right direction and if the first meetings are carefully planned and thought out, interest is bound to follow.

We are hearing a great deal these days about the difficulty of getting the right type of head nurses. Isn't this perhaps because we have in some ways seemed to limit the scope of the work? We say the position offers a splendid opportunity to test and develop executive ability. Would it not be well to emphasize the opportunities it offers in teaching?